## PART B - FEE(S) TRANSMITTAL



Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

DEC 2.7 7005	(ق		Alexandria, Virginia 22313-1450 or <u>Fax</u> (571) 273-2885					
INSTRUCTIONS: The appropriate August 1	form should be used for transcorrespondence including the d below or directed otherwise	smitting the ISSU Patent, advance or	E FEE and ders and not	PUBLICATION ification of main	FEE (if requirements fees	will be mailed to the current	hould be completed where	
indicated unless correcte maintenance fee notificat	d below or directed otherwise ions.	in Block 1, by (a)	) specifying	a new correspon	dence address	; and/or (b) indicating a sep	arate "FEE ADDRESS" to	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, mushave its own certificate of mailing or transmission.				
39207					Co	rtificate of Mailing or Tran	emission	
SACCO & ASSOCIATES, PA P.O. BOX 30999					I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
	GARDENS, FL 33420-0	999		States P addresse transmit	ostal Service ed to the Ma ted to the USI	with sufficient postage for fill il Stop ISSUE FEE address PTO (571) 273-2885, on the		
OLEAND CHOOLENT AND	WWW. 1000000			Rc	bert.	Sacco	(Depositor's name)	
C:1501						(Signature)		
C:1504 C:8001	300.00 OP 9.00 OP		12			20-05	(Date)	
APPLICATION NO.	FILING DATE	FIRST NAMED INVI		D INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/628,846	10/628,846 07/28/2003		Randy	T. Pike		7162-103	6244	
APPLN. TYPE	SMALL ENTITY	ISSUE FI	ISSUE FEE		ION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	ATTER. TITE SHARE STATES		)	\$300		\$1700	12/22/2005	
Holiprovisional						1		
EXAMINER		ART UNIT		CLASS-SUI		J		
MERLINO, AMANDA H		2877		356-43	6000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list Sacco & Associates, Page 1. Sacco agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered attorneys or agents. If no name is listed, no name will be printed.					
-	ND RESIDENCE DATA TO E	RE PRINTED ON T	HE PATEN	T (print or type)				
PLEASE NOTE: Unle recordation as set forth	ess an assignee is identified be in 37 CFR 3.11. Completion	elow, no assignee of this form is NO	data will app Γ a substitute	pear on the paten for filing an assi	t. If an assig gnment.	nee is identified below, the	document has been filed for	
(A) NAME OF ASSIC	GNEE	(B	) RESIDENO	CE: (CITY and S	TATE OR CO	UNTRY)		
	RRIS CORPORAT	·	MELBOURNE, FL  nted on the patent):					
Please check the appropri	ate assignee category or category	ories (will not be pri	inted on the p	patent):	lividual XXX (	Corporation or other private gr	oup entity Governmen	
4a. The following fec(s) a	are enclosed:	4ն	Payment of		d C (-) !	1		
15540 1 00					amount of the fee(s) is enclosed. edit card. Form PTO-2038 is attached.			
				The Director is hereby authorized by charge the required fee(s), or credit any overpayment, the eposit Account Number				
Advance Order - #	of Copies	<del> </del>	Deposit Acc	count Number	50-288	(enclose an extra	copy of this form).	
a. Applicant claims	us (from status indicated above S SMALL ENTITY status. See	37 CFR 1.27.	☐ b. Applie	cant is no longer	claiming SMA	LL ENTITY status. See 37 C	CFR 1.27(g)(2).	
The Director of the USPT NOTE: The Issue Fee and interest as shown by the r	O is requested to apply the Iss d Publication Fee (if required) ecords of the United States Pat	ue Fee and Publicat will not be accepted tent and Trademark	tion Fee (if and if the from anyon Office.	ny) or to re-apply e other than the a	any previous pplicant; a reg	ly paid issue fee to the applic sistered attorney or agent; or t	ation identified above. he assignee or other party i	
Authorized Signature	16			<u> </u>	Date	12-20-05		
Typed or printed name	Robert J. S.	acco		_	Registratio	n No35,6	67	
This collection of information	ation is required by 37 CFR 1	311. The information	n is required	to obtain or retai	n a benefit by	the public which is to file (ar	nd by the USPTO to proces	

an application. Confidentiality is governed by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application No.

10/628,846

Confirmation No. 6244

**Applicant** 

PIKE

Filed

July 28, 2003

TC/A.U.

2877

Examiner

MERLINO, Amanda H.

Docket No.

7162-0103

**Customer No** 

39207

## TRANSMITTAL LETTER

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Please find attached for filing

- ✓ PTOL 85 Fee Transmittal
- ✓ Fee: \$1709.00
- ✓ Other: Postcard Receipt
- ✓ Please charge any deficiencies or credit any overpayments to Deposit Acct. No. 50-2884

Robert J. Sacco

Registration No. 35,667

SACCO & ASSOCIATES, P.A.

P.O. Box 30999

Palm Beach Gardens, FL 33420-0999

Tel: 561-626-2222

Certificate Under 37 C.F.R. 1.8(a)

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on 12-20-05 Typed name of person signing this certificate: ROBERT J. SACCO

{00008482;}